

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Page 1 of 1

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1.



Willie Cope
 Pike County Jail
 P O Box 1147
 Troy, AL 36081-1147

07cW919 Show Order!!

2. Article Number
(Transfer from service label)

7006 2760 0005 4873 8405

A. Signature

Yours faithfully,
X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

12/14

D. Is delivery address different from item 1? YesIf YES, enter delivery address below: No

3. Service Type

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540